SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature Agent Addressee B. Received by (Finited Name) C. Date of Pelivery J. J. S. If YES, enter delivery address below:
1. Article Addressed to: Social Social States of All Social States of Al	2 January Cara
HUSOZ. PSLACH GUJHOU.	3. Service Type Certified Mail Registered Insured Mail C.O.D.
B'hAm Al 35203	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7	004 2510 0001 0150 2763
(Transfer from service label) Domestic Return Receipt 102595-02-M-1540	